

WATER WELL REPORT

STATE OF WASHINGTON

Application No. 61-2216

Permit No.

(1) OWNER: Name ROBERT P. FAKEWELL Address 4086 400 AVE. W. OAKHARBOR(2) LOCATION OF WELL: County ISLAND SE 1/4 SW 1/4 Sec 17 T. 33 N. R. 2 E. W. 1Bearing and distance from section or subdivision corner 285' S. E. 30' E. OF NW COR.(3) PROPOSED USE: Domestic ☐ Industrial ☐ Municipal ☒
Irrigation ☐ Test Well ☐ Other ☐(4) TYPE OF WORK: Owner's number of well (if more than one)
New well ☒ Method: Dug ☐ Bored ☐
Deepened ☐ Cable ☒ Driven ☐
Reconditioned ☐ Rotary ☒ Jetted ☐(5) DIMENSIONS: Diameter of well 6 inches.
Drilled 30 ft. Depth of completed well 310 ft.

(6) CONSTRUCTION DETAILS:

Casing installed: 6" Diam. from 0 ft. to 301 ft.
Threaded ☐ " Diam. from _____ ft. to _____ ft.
Welded ☒ " Diam. from _____ ft. to _____ ft.Perforations: Yes ☐ No ☒Type of perforator used _____
SIZE of perforations _____ in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.Screens: Yes ☒ No ☐Manufacturer's Name Johnson
Type STAINLESS Model No. _____
Diam. 6" Slot size 12 from 30.0 ft. to 30.5 ft.
Diam. 6" Slot size 18 from 30.5 ft. to 31.0 ft.Gravel packed: Yes ☐ No ☒ Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.Surface seal: Yes ☒ No ☐ To what depth? 18+ ft.
Material used in seal BENTONITE
Did any strata contain unusable water? Yes ☐ No ☒
Type of water? _____ Depth of strata _____
Method of sealing strata off _____(7) PUMP: Manufacturer's Name REDI
Type: 28D18P301 H.P. 3(8) WATER LEVELS: Land surface elevation _____ ft.
above mean sea level. _____ ft.
Static level 268 ft. below top of well Date 3-1-75
Artesian pressure _____ lbs. per square inch Date _____
Artesian water is controlled by _____ (Cap, valve, etc.)(9) WELL TESTS: Drawdown is amount water level is lowered below static level
7/22/75
Was a pump test made? Yes ☒ No ☐ If yes, by whom? BOB P. WARD
Yield: 28 gal./min. with 2.9 ft. drawdown after 4 1/2 hrs.
" " " " " "
" " " " " "

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time	Water Level	Time	Water Level	Time	Water Level

Date of test _____
Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m. Date _____
Temperature of water _____ Was a chemical analysis made? Yes ☐ No ☒

(10) WELL LOG:

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation

MATERIAL	FROM	TO
GRAVELLY CLAY	0	30
HARD SAND	30	48
GRAVEL	48	164
SANDY CLAY	164	174
MUCKY SAND	174	215
SANDY CLAY	215	272
FINE LIGHT SAND	272	286
SANDY CLAY	286	294
WATER AQUIFER SAND	294	312

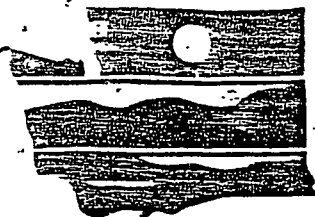
SLEEPER ACRES COMM ASSOC INC. PWS 29901 SRC 01
ISLAND Long -122 587965 Lat 48 342838
Well Tag AGA555Work started FEB, 1975. Completed MAY, 1975

WELL DRILLER'S STATEMENT:

This well was drilled under my jurisdiction and this report true to the best of my knowledge and belief.

NAME W. HIDEY WELL DRILLERS
(Person, firm, or corporation) (Type or print)Address OAK HARBOR WASH[Signed] William Foster
(Well Driller)License No. 0124 Date May, 1975

(USE ADDITIONAL SHEETS IF NECESSARY)



WASHINGTON STATE
DEPARTMENT OF
ECOLOGY

Well Tagging Form

Unique Well Tag No: A6A555

501

RECORD VERIFICATION (check one)

- ☐ Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)
- ☐ Verification inconclusive
- ☐ Well Report not available

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name: Sleeper Acres Comm. Assoc. Last Name: _____
29901A
 Street Address: _____
 City: _____ State: _____

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address: 4008 Dune
 City: _____ County: _____
 T. _____ N. R. _____ W.M. Sec. _____ 1/4 of the _____

FOR AGENCY USE ONLY

Latitude _____
 Longitude _____

Elevation at land surface _____ feet/meters (circle one)

Additional information, if available:

- ☐ Location marked on topographic map (please attach)
- ☐ Location marked on air photo (please attach)

- ☐ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated
- ☐ Digital Altimeter
- ☐ Topographic Map
- ☐ Other _____

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

FOR AGENCY USE ONLY

WELL CHARACTERISTICS

General Description of well (size of casing, type of well, housing, etc.)

6" well casing, 3'-4' high cinderblock house separated from
Brown pump house and water storage tank. Set on a parcel by itself
within a private community.

Location of Well identification Tag:

well pipes going into well head

Supplemental tag needed for ease of identifying well?

☐

Yes

☒

No

Where was tag placed?

Scale 1:24,000 (1"=2,000')

Indicate the location of the well within the Section by drawing a dot at that point.

SECTION _____

C	B	A
F	G	H
L	K	J
P	Q	R

REMARKS:

FOR DEPARTMENT OF ECOLOGY WATER RESOURCES PROGRAM ONLY

Permit #

Date Issued

One:

Application

Permit

Certificate

Claim

Exempt